CLAIMS ONLY								Application Number			Filing Date			
								10/019312 Applicant(s)						
								s)						
						* May be used for additional claims or amendments								
CLAIMS						SECOND								
				DMENT		IDMENT	L				·	ļ.,		
<u> </u>	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend	
2	 	 		 , 	 	 	51 52				 	 	 	
3		 	 	 ', 	f		53				 			
4	 		1	1	· · · · · · ·		54							
. 5							55							
6			ļ	1		 	56				ļ	·		
7 8	ļ		 _,	 		 	57 58						 	
9			 	,		1	59						 	
10			1	1	 		60							
11							61							
12		ļ <u> </u>					62						ļ	
13			ļ	<u> </u>			63 64		ļ		 	 	 	
14 15		 		<u> </u>	 	 	65				 	 	 	
16		 				 	66							
17				1			67							
18							68							
19						ļ	69				ļ		ļ	
20 21	,		 	<u>'</u>		ļ	70 71				 		 	
22							72							
23					-	 	73							
24			1				74							
25							75						-	
26							76 77						-	
27 28							78							
29			 				79							
30							80							
31							81							
32						ļi	82 83							
33							84		-					
35							85							
36							86							
37							87							
38							88							
39 40							90							
41				-			91							
42							92							
43							93							
44							94							
45 46							95 96							
46		i					97	<u> </u>						
48							98							
49							99							
50							100							
Total			4		. [Total Indep			ļ			.	
Indep Total	4				4		Total	4	}					
Depend			23				Depend							
Total			27				Total	- T	Ĭ	7				
Claims			0/				Claims							